

PHU would need in the 35th minute. Josh Roberts played a cross in from the right flank that Starikov and Miller both went up for. Starikov just got a piece of the ball and it deflected right to a waiting Eby.

"I'd barely scored all year and to get the first goal of the state championship is just crazy," Eby said. "This feels amazing."

Harrington put PHU up 2-0 in the 38th minute with his sixth strike of the season. Kamara got his head on a strong throw in from Max Venker, sending it toward the middle of the box. The ball fell into a scramble of legs and squirted free right to Harrington, who was running full speed from midfield and the senior defender squarely drilled it into upper left corner.

"The ball kind of fumbled out while I was running up," Harrington said. "And it was just right there."

Hileman was brilliant in goal, making eight saves. The senior got tremendous help from fullbacks Nate Wysk, Levi Curnutte, Jamison Sweat and Harrington, shutting out an offense that featured 49-goal scorer Pascal Milien.

"Can't end a season any better than two goose eggs," Hileman said.

And what PHU win would be complete without a strike from Starikov? The junior transfer from California banged home his 43rd goal of the season in the 70th minute.

"Eugene wouldn't let the game end without getting one," Mannino said. "He wanted to be the last straw that broke their back and he did it."

ASSURED FUNDING FOR THE DEPARTMENT OF VETERANS AFFAIRS

HON. LOUISE MCINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 1, 2006

Ms. SLAUGHTER. Mr. Speaker, I rise today to express my support for assured funding for the veterans' health care. For too long, funding for the critical services needed by our veterans has been subject to the political whims of Congress and the Administration and budgetary schemes intended to hide inefficiencies and misplaced priorities. With a new generation of veterans returning home from their duty overseas, we must ensure that the Department of Veterans Affairs has the resources necessary to honor the promises we have made to our veterans.

Last year, the Administration admitted that it had underestimated the number of servicemen and women requiring medical treatment upon return from their missions in Iraq and Afghanistan. Within one week, the Administration begrudgingly reported that the Department of Veterans Affairs was \$1 billion short of being able to fulfill its obligations to veterans for Fiscal Year 2005, and would be \$2.6 billion short of fulfilling its obligations for Fiscal Year 2006 without Emergency Supplemental Appropriations bills.

Efforts to fully restore funding were initially stymied by denial and vain attempts to save face by those who had condemned attempts to provide adequate funding to the VA during the traditional appropriations process. What should have been a quick fix to an embarrassing problem turned into a drawn out negotiation battle between those who argued that the VA needed only the barest minimum sum of money to carry out its mission and those

who demanded additional funding to guarantee veterans' health care would not be interrupted. Once again, veterans' healthcare was left in limbo while the Congressional Leadership played politics.

In the face of growing public outrage, the funding shortfall was eventually restored. But, it appears that we have learned nothing from the preventable incident. Yet again, veterans' health care will be subject to the lengthy, political appropriations process and the Administration's request again shortchanges veterans.

Mr. Speaker, our veterans dutifully and courageously honored their commitment to our Nation. Now, it is our turn to keep our promises. American veterans deserve better than to have their healthcare in constant jeopardy. I hope my colleagues will join me in supporting assured funding for veterans healthcare so that those who have served will always have the care they need when they need it. We can, and must, do better for our nation's veterans. With the most sincere gratitude for all that American veterans have done to protect our freedom.

IN RECOGNITION OF NATIONAL KIDNEY MONTH

HON. XAVIER BECERRA

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 1, 2006

Mr. BECERRA. Mr. Speaker, I rise on this first day of National Kidney Month to recognize the efforts of numerous dedicated individuals, many in this body, who work not only to increase awareness about the devastating effects of kidney disease, but who also look for ways to eradicate this debilitating disease once and for all.

Today, more than 400,000 Americans are living with the wretched pain and horrible inconvenience of kidney failure, leaving them dependent upon life-saving dialysis three to four times each week. Twenty million more have Chronic Kidney Disease, where patients experience a gradual deterioration of kidney function, the end result of which is kidney failure.

The leading causes of these diseases are diabetes and high blood pressure, which disproportionately affect African Americans and Latinos. Diabetes occurs at twice the rate in the African American community as it does in white Americans. As of 2002, two million Latino adults had been diagnosed with diabetes. High blood pressure is also more prevalent in these communities. In fact, one in three African American adults are affected by high blood pressure. According to the American Heart Association, the prevalence of hypertension in African Americans in the United States is among the highest in the world.

Both Chronic Kidney Disease and kidney failure disproportionately affect African Americans and Latinos. African Americans make up about 13 percent of the U.S. population but comprise 32 percent of patients treated for kidney failure, giving them a kidney failure rate that is 4.2 times greater than that of white Americans. Among patients with diabetes, Latinos are between 4.5 and 6.6 times more likely to develop kidney disease than non-Hispanic white Americans.

Given that early kidney disease has no symptoms, most people do not realize that

they are in danger of kidney failure. Therefore, it is critically important for all of us, whether it be members of Congress, health organizations or our extended families, to do our best to increase awareness of the dangers of kidney disease and encourage our family members, our friends and our neighbors who have high blood pressure and diabetes to ask their doctors to run simple blood and urine tests that can detect potential problems.

The good news is that once diagnosed, patients can receive high quality care. Individuals with kidney disease who are able to obtain treatment early experience a higher quality of life and are able to maintain more of their day-to-day activities, including keeping their jobs. This is a situation to which an ounce of prevention results in a gallon of future savings, both in quality of life and in hard dollars for individuals and for the government.

Mr. Speaker, I applaud the goals set forth in observance of National Kidney Month, for we must continue to raise awareness about this important issue and to show support for Americans living with kidney disease. But, I am concerned that in an environment in which our budgetary priorities include cutting funding for the National Institute of Diabetes and Digestive and Kidney Disease to the tune of \$20 million in fiscal year 2006 and '07, we are not doing enough to thwart the increase in kidney failure and the conditions from which it results. We cannot ignore the human suffering and financial consequences of kidney failure. Our failure to make this disease a major legislative priority will cost us greatly in the future.

BUCK O'NEILL SHOULD BE ADMITTED TO THE BASEBALL HALL OF FAME

HON. DENNIS MOORE

OF KANSAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 1, 2006

Mr. MOORE of Kansas. Mr. Speaker, I was sorely disappointed recently to learn that the Baseball Hall of Fame failed to vote to induct John Jordan "Buck" O'Neill into its ranks.

Born the grandson of slaves, Buck joined the Kansas City Monarchs of the Negro League in 1938. He remained in Kansas City with the Monarchs for 17 spectacular years, 10 as a player and 7 as manager. During this time he was named an all-star three times as a player, served 2 years with the United States Navy, and led the Monarchs to four league titles as a manager, all the while facing the harshness of separation and discrimination in a country that was still segregated. In 1962, Buck broke an important barrier, by being named the first African-American coach in the Major Leagues by the Chicago Cubs. After 33 years with the Cubs, Buck returned home in 1988 to scout for the Kansas City Royals. He currently serves as chairman of the Negro Leagues Baseball Museum in Kansas City, a continuing demonstration of his love for the game of baseball and for his commitment to the essential role that the Negro Leagues played in the integration of both American sport and American society.

During his time in Kansas City, Buck has taught the citizens of the Kansas City metropolitan region about the importance of determination and resolve in the face of hostility, in